BEST AVAILABLE COPY

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999									7	70207			:.
									G	76367	,	··-	
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OŔ	OTHER THAN	
FOR			NUMBER FILED			NUMBER EXTRA			Ē	FEE) 	RATE	FEE
BASIC FEE									, E	345.00	OR		690.00
TOTAL CLAIMS			36	minus	20≈	. 16		X\$ 9)= }=	144,∞		X\$18=	
INDEPENDENT CLAIMS			10	minus	3 =	· 7		X39)=	- 5-		X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								+130		273.00	OR	7,702	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2										OR	+260=	
								TOT	AL _.	762.∞	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SM A	111	ENTITY	OR	OTHER SMALL		
		CL/	NMS			Column 2) HIGHEST	(Column 3)	JIVIA	LL	ADDI-	on I I	SWALL	ADDI-
AMENDMENT A		AF	AINING TER DMENT	**************************************	PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε	TIONAL FEE		RATE	TIONAL FEE
	Total	*		Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent	*	N 05 N	Minus	***		=	X39	=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEP					DENT CLAIM		+130) <u> </u>			+260=	
					•				TAL		OR	TOTAL	
		(O-lu	(Oaliman 1)					ADDIT.			OR	ADDIT. FEE	-
AMENDMENT B			imn 1) Aims			Column 2) HIGHEST	(Column 3)	_		ADDI	1		
		AF	AINING TER DMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	X\$ 9)=		OR	X\$18=	
	Independent			Minus	***		=	X39	=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEP					DENT CLAIM		400	_			000	
,		•		·				+130			OR	+260=	
								ADDIT.	TAL		OR	TOTAL ADDIT. FEE	
			imn 1) AIMS			Column 2) HIGHEST	(Column 3)						5
AMENDMENT C		REMA	AINING TER DMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**	·	=	X\$ 9	<u> </u>		OR	X\$18=	
	Independent	*		Minus	***		=	X39				X78=	
	FIRST PRESE	NTATIO	N OF ML	JLTIPLE DE	PEŅ	ENT CLAIM			_	·	OR	7,70-	
• 1	f the entry in colum	mn 1 io lo	see than th	e antre in col-	ıma o	write "O" in a-	luma 2	+130			OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
•	The "Highest Num	ber Prev	iously Pai	d For" (Total o	r Inde	pendent) is the	in 3, enter 3." highest number	found in th	e ap	propriate box	(in col	umn 1.	